10624397

PTC/SB/06 (08-03)
Approved for use through 7/31/2008. OMB 0651-0032
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	N RECORD	Intermation unters II displaye a valid OMB control number. Application of Orcket Number O COLUMN 39						
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FIL		ILED HUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))					1.325	OR		
		mirrus 20 a		×14.	30	OR	X 5 0	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 3 c ·		. x:U2.		OR	X 1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))				+,140		OR	+ \$	
"If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL	9411.13	D _{or}	TOTAL	
CLAIMS AS AMENDED - PART II								
	olumn 1)	(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	
YIUILA RE	CLAIMS MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
O total	24 Minu	70	* (AX)	x 3=		OR	× 8=	
Z Independent " U) (37 CFR 1 14(bt)	. Minu	• 7	1.1.4	x s=		OR	x s =	
FIRST PRESENTATION	OF MULTIPLE DEPE	IDENT CLAIM (37 CF	R 1.16(dj)	+;		OR	+1	
· 				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
, (Cc	dumn 1)	(Column 2)	(Column 3)	'	······································	2		
	LAIMS MAINING	HIGHEST NUMBER	PRESENT	RATE	ADDI	•	0.75	ADDI-
	AFTER ENDMENT	PREVIOUSLY PAID FOR-	EXTRA	Total	TIONAL FEE		RATE:	TIONAL
MAME AME AME (1) for 1:46(4) Independent (17 CFR 1:46(4)) AME (17 CFR 1:46(4))	16 Minus		• -	X 5=		CR	x 3	FEE
Z Independent	2 Minus	1 2	•					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAMM (37 CFR 1.18(d))			×3/	-	OR			
				TOTAL TOTAL		OR .	TOTAL	
9-10-070	tuma 1)	(Catumn 2)	(Column 3)	ADDYFEE	LJ	OR	ADD'L FEE	
U C	LAIMS MAINING VFTER .	HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADOI- TIONAL		RATE	ADDI- TIONAJ
Total Total (37 CFR \ \1854) Independent	MINUS	PAID FOR	- C	x.25:	FEE	OR	×.50.	FEE
Z Independent U (37 GR 1 title)	2 Minus	1 × 2		x 100=	$\overline{\bigcirc}$	OR	* 70	
FIRST PRESENTATION	1.12/3		OP.	136				
TOTA					\	or/	TOTAL ADD'I, FEE	
" If the entry in column " If the "Highest Humbe "" If the "Highest Number	r Previously Paid Fo	or in this space i	a less than 20, e	nier *20*		س	NUULI EE	

The reginest number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of Information is required by 37 CFR 1.18 The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is go remed by 35 U.S.C. 122 and 37 CFR 1.14 This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commons on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Potent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO HOT SEND FEES OR COUNTETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.